

CAMP GONEALOT FOR TEENS (11-13 YEARS OF AGE)

The Concord Parks and Recreation Department's Camp GoneAlot is offered to young men and women ages 11 - 13 who are mature, enthusiastic and have a sense of adventure. The program is geared to motivate and stimulate the participant's willingness to learn through field trips and age appropriate activities.

In addition to recreational activities, such as roller-skating and weekly swimming, tennis lessons and arts & crafts will be offered. Big trips will be to Carowinds in June and Emerald Pointe Water Park the last week of camp. By the end of the program they will have completed a community service project.

GENERAL INFORMATION FOR 2013

Camp GoneAlot is an eight week program for 11 - 13 year olds. This program operates **June 17 to August 9, 2013** and will be closed on July 4th.

PROGRAM HOURS

7:30 a.m. until 6:00 p.m.,

Monday - Friday

PROGRAM SITE

Academy Recreation Center
147 Academy Avenue NW, Concord

SNACKS & LUNCHEONS

Bring snacks, water bottle and lunch.

REGISTRATION INFORMATION

Registration will be available to **returning 2012 campers** on January 16 and will be available two ways.

ONLINE REGISTRATION

www.concordparksandrec.org

Begins Wednesday, 1/16, 8:00 a.m. until midnight on 1/20. Assistance in online registration will only be available until 5:00 p.m.

WALK-IN REGISTRATION

Begins

Wednesday, 1/16

8:00 a.m. to 5:00 p.m.

Academy Recreation Center
147 Academy Avenue NW

Registration will open to **new campers** on Wednesday, 2/6 from 8:00 a.m. until 5:00 p.m. by online and walk-in registration.

Those aging up to Camp GoneAlot please register in Camp GoneAlot

REGISTRATION FEES

\$350.00/child for City of Concord residents

\$450.00/child for non-City residents

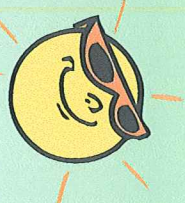
To qualify as a City resident, participant must reside within the City Limits of Concord. Fee includes trips and program offerings.

A deposit of \$100 is due at registration.

Balance is due by May 31ST.

No refunds will be given after May 31ST.

Registrations on or after May 31ST must be PAID IN FULL at the time of registration.

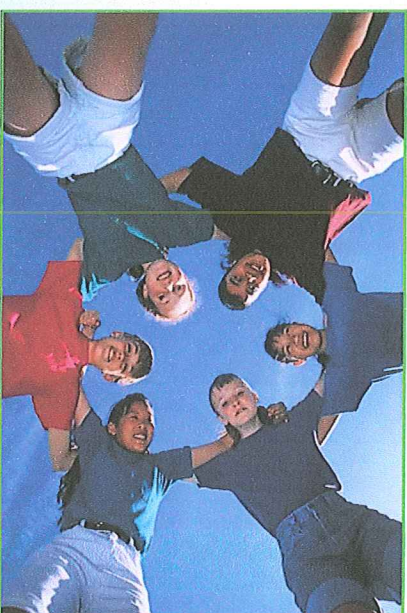


2013

Camp GoneAlot

For Teens

11-13 YEAR OLD PROGRAM AT
ACADEMY CENTER



Concord
NORTH CAROLINA
PARKS & RECREATION

This institution is an equal opportunity provider.

For more contact information:
704-920-5600
recreation@ci.concord.nc.us
www.concordparksandrec.org



NORTH CAROLINA
PARKS & RECREATION

OFFICE USE: Park Site _____

Receipt # _____	Receipt # _____
Cash/Check # _____	Cash/Check # _____
Amount \$ _____	Amount \$ _____
Date _____	Date _____

CAMP GONEALOT 11-13 YEAR PROGRAM AT ACADEMY RECREATION CENTER

PLEASE PRINT

Child's Name (First Name) (Middle Name) (Last Name)

Address _____

Telephone # _____ Email Address _____ (City) _____ (Zip) _____

Date of Birth _____ Age _____ Male _____ Female _____

Must be between the ages of 11 and 13. We reserve the right to require birth certificates if deemed necessary.

Please provide the following CONTACT INFORMATION. List in contact order:

With whom does the child reside (please check): Mother _____ Father _____ Both _____ Other (specify) _____

Contact #1 (parent/guardian) name: _____ Relationship to child: _____

Address: _____ Daytime #: _____ Evening #: _____ Mobile/Pager #: _____

Employer: _____ Relationship to child: _____

Address: _____ Daytime #: _____ Evening #: _____ Mobile/Pager #: _____

Employer: _____ Relationship to child: _____

Address: _____ Daytime #: _____ Evening #: _____ Mobile/Pager #: _____

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Employer: _____ Relationship to child: _____

Address: _____ Daytime #: _____ Evening #: _____ Mobile/Pager #: _____

Employer: _____ Relationship to child: _____

PARENTAL CONSENT INFORMATION:

Must be signed for applicant to participate.

I do hereby grant permission for my child to participate in the above program and release the City of Concord Parks and Recreation Department and its staff from any liability that might occur during the operation of this program. I hereby give consent for emergency treatment as approved by his/her camp leader or other adult escort, in case of illness or injury while participating in the program. I understand that this is to prevent undue delay and assure prompt treatment and that only a licensed physician will be engaged for such an emergency. Parents will be notified in case of serious illness or injury as quickly as they can be reached, but this will make immediate treatment possible.

I understand that in cases of inappropriate conduct, my child can be subject to suspension from the program. Money will not be refunded. I understand that the summer camp program operates from 7:30 a.m. to 6:00 p.m. and that children MUST be picked up NO LATER THAN 6:00 P.M. A \$5.00 per 15-minute rate will be assessed to parents picking up children after 6:00 p.m. I give permission for photographs of my child to be used for City of Concord Parks & Recreation publicity. I understand that providing false information may lead to dismissal from the program with no refunds.

"I agree to release and hold harmless the City of Concord and its staff from any and all claims for personal injury, property loss or any other loss that may arise out of or during participation in this program."

I have read and fully understand all the above information.

Signature of Parent/Guardian

Date

Please circle T-Shirt Size:

Youth Medium Youth Large

Adult Small

Adult Medium Adult Large Adult XL